



TRANSMITTAL COVER SHEET

Pages (Including Cover): 05

Date: Monday, July 23, 2007 11:49:56 AM

To:	Mail Stop: ASSIGNMENT RECORDATION SERVICES
Company:	Commissioner for Patents
Phone:	
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From:	Lisa Harden
Phone:	
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Message:

WARNING!
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Client / Matter: 13030 / 0013

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TRANSMITTAL COVER SHEET

Pages (Including Cover):	4	Date:	July 23, 2007
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Mail Stop: ASSIGNMENT RECORDATION SERVICES	Commissioner for Patents	571-273-0140	

From:	Mark C. Reichel
Phone:	317-236-5882
Subject:	<p>Re: Assignment of Invention Invention: SEAT SUSPENSION SYSTEM Inventors: MOORHOUSE, David and BRITTON, Phillip Serial No.: 10/599,917 Filed: October 13, 2006 Group Art: Unknown Examiner: Unknown Our Docket: P01487-US-00 (13030.0013)</p> <p><u>xx</u> Transmittal of Assignment <u>xx</u> Recordation Form Cover Sheet (Form PTO-1595) <u>xx</u> Assignment of Invention</p>

Message:

Please see the attached transmittal of assignment with accompanying documents.

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Client / Matter: 13030.0013

Job Code (Fax Center Use Only):

July 23, 2007

WRITER'S DIRECT NUMBER: (317) 236-5882
DIRECT FAX: (317) 592-5453
INTERNET: MARK.REICHEL@ICEMILLER.COM

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

VIA FACSIMILE 571-273-0140

Mail Stop: ASSIGNMENT RECORDATION SERVICES
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P.O. Box 1450
Alexandria, Virginia 22313-1450

I hereby certify that this paper or fee is being transmitted by facsimile to
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number 571-273-0140, on July 23, 2007.

Lisa D. Harden

Typed or Printed Name of Person Signing this Certificate



Signature

July 23, 2007

Date of Signature

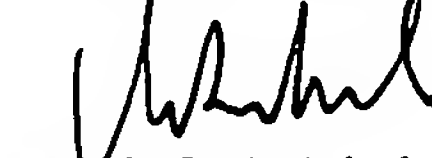
Re: Assignment of Invention
Invention: SEAT SUSPENSION SYSTEM
Inventors: MOORHOUSE, David and BRITTON, Phillip
Serial No.: 10/599,917
Filed: October 13, 2006
Group Art: Unknown
Examiner: Unknown
Our Docket: P01487-US-00 (13030.0013)

TRANSMITTAL OF ASSIGNMENT

Attached is an Assignment of Invention and Recordation Form Cover Sheet (Form PTO-1595).
Applicant authorizes the \$40.00 recordation filing fee pursuant to 37 C.F.R. § 1.21(h) & 3.41 be charged
to deposit account number 09-0007. In the event the Applicant has inadvertently overlooked the need for
payment of any additional fee, Applicant conditionally petitions therefor, and authorizes any fee
deficiency to be charged to deposit account 09-0007. When doing so, please refer to our file number
P01487-US-00 (13030.0013).

Respectfully submitted,

ICE MILLER LLP



Mark C. Reichel
Attorney Registration No. 53,509
One American Square, Suite 3100
Indianapolis, Indiana 46282-0200
Telephone: (317) 236-5882

MCR/ldh

Enclosures: Recordation Form Cover Sheet (Form PTO-1595)
Assignment of Invention

RECORDATION FORM COVER SHEET
PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)

MOORHOUSE, David and BRITTON, Phillip

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance/Execution Date(s):

Execution Date(s) March 15, 2007

☒ Assignment

☐ Merger

☐ Security Agreement

☐ Change of Name

☐ Joint Research Agreement

☐ Government Interest Assignment

☐ Executive Order 9424, Confirmatory License

☐ Other _____

2. Name and address of receiving party(ies)

Name: KAB Seating Limited

Internal Address: _____

Street Address: Stone Circle Road, Round Spinney

City: Northampton, NN3 8RS

State: _____

Country: Great Britain

Zip: _____

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application or patent number(s):

☐ This document is being filed together with a new application.

A. Patent Application No.(s)

10/599,917

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address to whom correspondence concerning document should be mailed:

Name: Mark C. Reichel, Ice Miller LLP

Internal Address: Suite 3100

Street Address: One American Square

City: Indianapolis

State: Indiana Zip: 46282.0200

Phone Number: (317) 236-2100

Fax Number: (317) 592-5453

Email Address: ipdocket@icemiller.com

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

☐ Authorized to be charged by credit card

☒ Authorized to be charged to deposit account

☐ Enclosed

☐ None required (government interest not affecting title)

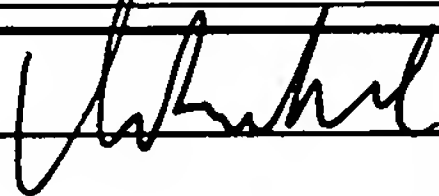
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a. Credit Card Last 4 Numbers _____
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b. Deposit Account Number 090007

Authorized User Name Ice Miller LLP

9. Signature:



Signature

Mark C. Reichel

Name of Person Signing

07/13/2007
Date

Total number of pages including cover sheet, attachments, and documents:

2

Harden Lisa

From: RightFax [RightFaxUser@iimexch2K3.indy.icemiller.com]
Sent: Monday, July 23, 2007 11:53 AM
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